

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION            | INITIALS | ID NO. | DATE     |
|---------------------|----------|--------|----------|
| FEE DETERMINATION   | W        | 7534   | 10-25-87 |
| O.I.P.E. CLASSIFIER |          | 8      | 10-29-89 |
| FORMALITY REVIEW    | W        | 67479  | 1-28-88  |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim          | Date |
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| Claim          | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here

(LEFT INSIDE)

BEST AVAILABLE